LAST DAY -DOG RESCUE-

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Dog/Puppy Adoption Application

Please check your email frequently during this process. Our Rescue is 100% volunteer based and many work full time jobs. Phone calls aren't always possible and email may be their only means of communication.				
Today's Date:				
Applicant Name:				
Co Applicant Name:				
Address:				
Home Phone: Work Phone:				
Cell Phone: Email:				
Alternate Email:				
Age of Applicant:				
Age of Co-Applicant:				
Dog's Name You're Applying for: Use this space to apply for an additional dog not listed above, or for multiple interests:				
In the event that the dog/cat that you are applying for is no longer available, would you be interested in adopting a different animal?				
(**If no, your application will be processed only for the particular animal you are applying for.)				
No				
(**If yes, your application will continue through the entire process of a vet history check and a home visit will be conducted. If your home visit and vet history check are satisfactory your application will be preapproved for 1 year from the date of your home visit.)				
Yes				

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In what type of home do you live:						
Single Family Duplex Apartment Townhouse						
Condominium Mobile Home Military Housing						
Do you own or rent your home: Rent Own?						
If you rent, can you provide written proof or name/number of contact if needed: Yes No No Is your yard fenced: No Yard Unfenced Yard Partially Fenced Yard? Completely Fenced Invisible						
What type of fence: Privacy Chain Link Invisible Other?						
If you have no yard or fence, how do you plan on handling/containing your animals when outside?						
What describes your home atmosphere: Grand Central Station Moderate Activity Zen Garden How many adults reside in your household:?						
How many children reside in your household:?						
If you have children in your household, what are their ages:						
Is everyone in your home in agreement with regard to adopting a pet: Yes No						
Does anyone in your home have medical or allergy conditions: Yes No						
If yes, please Describe:						
If allergies present themselves to a family member after adoption, what is your plan to handle that situation:						

Who will be the primary caretaker of your adopted pet:

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Who will be responsible for caring for your pet during your absence:

Please describe the characteristics you would like the animal to possess (be specific):						
Considering the energy level of your family, what energy level is a good fit for your family? Highly Active (jogging, hiking, agility, a Somewhat Active (long walks, likes to play outside but						
very active dog) will settle down nicely)						
Couch Potato (short walks, low energy)						
Do you currently have pets: Yes No?						
Name of Pet: Type/Breed: Age of Pet:						
If you have more than one pet what are their names, ages, type/breed:						
Is/are your current pet(s) Spayed or Neutered: Yes No						
If no, please explain:						
Is/are your current pet(s) current with Vaccines: Yes No						
If no, please explain:						
Is/are your current pet(s) given monthly heartworm preventive: Yes No						
Do your pet(s) live inside or outside: Primarily Inside Primarily Outside Inside & Outside						
Other (please explain)						
Other than your current pets, have you had any pets in the past 10 years: Yes No						
Name of Previous Pet (1): Type/Breed of Previous Pet (1):						

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Age of Previous Pet (1): _____ How long did you have Previous Pet (1): _____

Why is Previous Pet (1) no longer with you (if deceased, cause & year they passed): _____?

 Name of Previous Pet (2):
 Type/Breed of Previous Pet (2):

 Age of Previous Pet (2):
 How long did you have Previous Pet (2):

Why is Previous Pet (2) no longer with you (if deceased, cause & year they passed): _____?

 Name of Previous Pet (3):
 Type/Breed of Previous Pet (3):

 Age of Previous Pet (3):
 How long did you have Previous Pet (3):

 Why is Previous Pet (3) no longer with you (if deceased, cause & year they passed):
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Please contact your vet within 24 hours of submitting this application and give them permission for Last Day Dog Rescue to discuss vetting history with them.

Were the above pets examined and vaccinated as required by your veterinarian: Yes No
If no, please explain:
Veterinarian's Information (Name of vet office, phone numbers, and which pet(s) were seen there. Also please list veterinarian practice where pets receive(d) spay/neuter, vaccinations, heartworm testing/prevention. If any services were performed by a Rescue, please provide name & contact info):

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http://www.facebook.com/lastdaydogrescue Last Day Dog Rescue PO Box 51935 http://twitter.com/@lastdaydogs Livonia, Michigan 48151 - 5935 www.lastdaydogrescue.org Have you ever given up a pet: Yes _____ No____? If yes, please explain: Where will your adopted animal sleep: Primarily Inside _____ Primarily Outside _____ Inside & Outside ____ Other _____ If other, please explain: _____ Do you plan on enrolling your dog in obedience classes: Yes _____ No____? IF no, describe how you will train the pet: How much time will the animal spend alone during the day (Please state if you will have someone come and take the animal out/walk during lunch breaks etc.): _____ How much time will this dog spend outside on a regular basis: Where will the animal be kept when you are not home: What are your plans for your dog while on vacation: _____? How do you plan on exercising your pet: ______ Rescue animals require time to adjust to their new environment. What amount of time do you consider to be reasonable for this adjustment: _____? What will you do with this pet if you move (be specific): What arrangements will you make to care for this pet in the event you can no longer do so (be specific): What behaviors would you be unable to tolerate from a pet (check ALL that apply): Potty Accidents Fighting Being on furniture Hiding from company/family members Barking _____ Escaping _____ Awaking early _____ Shedding _____ Digging _____ Counter Surfing _____ Chewing Not adjusting quickly to other pets in the home Jumping on people Getting into garbage _____ None of these things would make me give up my dog __ If the animal develops or begins one of the listed behaviors that you feel is intolerable, would you consider working with a behaviorist or trainer before giving up on the dog: Yes No

What methods you plan on using to discourage unwanted behavior(s):

For what reason would you consider giving up the animal? Please answer this question honestly! Our goal is to place our animals into homes where they will stay FOREVER. As some pets are not meant to live in every situation, we need to know for what specific reasons you would relinquish this cat/dog. Be specific:

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Why have you chosen to adopt this animal? Be specific:

Why do you want this animal: Companion _____ Child's Pet _____ Companion to another Pet ____?

Hunting _____ Gift _____ Guard _____ Watch _____ Other _____

If other, be specific: ______

What are your feelings on spaying or neutering animals: ______

Are you aware that a pet requires yearly vaccines/tests and the costs can be a minimum of \$200? Note: Once you factor in food, trips to the groomers, pet sitter or kennel stays while you are on vacation and other injuries, illness, the cost of owning a pet often times can be as much as \$500 or more a year; per pet. Please consider this before making a decision to bring an animal into your home and family.

Yes _____ No ___

How long have you been looking for a pet: ______

Have you Applied Elsewhere: Yes _____ No ____

If yes, where and what is the status of that application or adoption:

You understand that rescue animals may have unknown medical history: Yes _____ No _____

You understand that rescue animals may have unknown behavior history: Yes _____ No _____

Would you be opposed to a "Last Day Dog Rescue" representative visiting/calling you after the adoption is complete to inquire about the animal: Yes_____ No _____

How did you hear	about LDDR: Prev	vious LDDR Adopter	r Word Of Mou	uth Adoption Event
Google Search	Petfinder	Pets911	Adopt-A-Pet	LDDR Website
Facebook	Twitter P	Pinterest Oth	1er	

I understand that completion of this application will in no way guarantee the adoption of this dog. Furthermore, any falsification of information will result in the immediate denial of this application. By signing this Application, I declare I am at least 18 years of age.

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Date

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Signature of Applicant

Last Day Dog Rescue PO Box 51935

Livonia, Michigan 48151 - 5935

Printed Name of Applicant

-----This section to be filled out by a Last Day Dog Rescue Volunteer-----This section to be filled out by a Last Day Dog Rescue Volunteer------

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Thank you for your interest in adopting one of our dogs. If you have any questions about any of our dogs or the adoption process, please email us at <u>ourlastdaydogs@gmail.com</u>.



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Animals are not a commodity. We ask that you and all family members have fully considered the responsibility of adoption as well as efforts and changes that you may need to make on behalf of your dog's behaviors and needs. Please take this decision seriously and well thought out. You should plan to have them for their life span, through their senior days.

What Each Applicant Should Know

- Dogs will require the following vaccines/tests for the rest of their lives: DHPP-L (this vaccine covers Distemper, Hepatitis, Adenovirus, Parainfluenza, Parvovirus, Leptospirosis), Rabies (1 year or 3 year vaccines), Bordetella (kennel cough), Lyme (to protect against Lyme disease which is transmitted to dogs through ticks), Heartworm test (transmitted to dogs through mosquitoes) and monthly heartworm pills. The costs for these vaccines/tests can be \$300 or more/year per animal.
- Last Day Dog Rescue dogs, unless otherwise stated, come with age-appropriate vaccines, sterilization, and have been deemed healthy by a licensed veterinarian. We cannot guarantee the future health of any of our dogs. Can you imagine what your doctor would say if you asked them to offer a guarantee that you will never come down with heart disease or cancer later in life? Those guarantees just cannot be made.
- Adoption fees vary by the individual dog. Dogs who are not sterilized will have an additional \$50 spay/neuter deposit which will be refunded to adopter upon proof of spay/neuter (separate form). The adoption fees help to cover the cost of food, vetting, training, etc. of the dogs while they are in Last Day Dog Rescue's care.
- Submitting an application does not obligate you to adopt nor does it guarantee the dog will be adopted to you. Last Day Dog Rescue works to place the dog in the best matched home. We collect applications on the dog in question and make our best determination on where we think the dog will do best.
- We depend on our vets and other professionals to help us make the best determination/estimation regarding the breed and age of all our dogs unless in an unusual circumstance we have some written documentation that has accompanied the dog from the shelter.
- While Last Day Dog Rescue makes every effort to process new applications as soon as possible, it may take up to 7 days to fully process your application. Most of the volunteers at Last Day Dog Rescue work full time jobs and we do our volunteer work on our lunch hours, evenings and weekends. We cannot always reply immediately to an application that has been placed.
- Our adoption process also involves a home visit which, depending on where you live in relation to home visit volunteers, can take some time. To become an approved adopter with Last Day Dog Rescue you must pass a vet check and have an approved home visit. If you do not hear from us within 10 days of application submission please email us at <u>ourlastdaydogs@gmail.com</u>. We will then try to get a home visit volunteer to your area asap.
 - Last Day Dog Rescue reserves the right to deny any application without explanation.
 - The Last Day Dog Rescue Board makes all adoption decisions and their decisions are FINAL.

Signature of Applicant

Date

Printed Name of Applicant